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JAN 11 2006

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS		Application Number: 09/775 692	
I hereby revoke all previous powers of attorney given in the above identified application.		<input type="checkbox"/> A Power of Attorney is submitted herewith.	
OR		<input checked="" type="checkbox"/> I hereby appoint the provisions associated with the Customer Number: 36738	
<input checked="" type="checkbox"/> Please change the correspondence address for the above identified application to:		<input checked="" type="checkbox"/> The address associated with Customer Number: 24955	
OR		<input type="checkbox"/> Firm or Individual Name:	
Address:		City: State: Zip:	
Country:		Telephone: Email:	
I am this:		<input type="checkbox"/> Applicant/Inventor.	
<input checked="" type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.72(b) is attached. (Form PTO-550g)		SIGNATURE of Applicant or Assignee of Record	
Signature:		Name: HAROLD T. FAIR	
Date: 1/11/2006		Telephone: (408) 955-7222	
NOTE: Signatures of all individuals associated with record of the entire interest or those who are associated with the record of the entire interest must be signed and dated.			
This collection of information is required by 37 CFR 1.55. The information is required to be provided by the person who is the assignee of record of the entire interest or the person who is the applicant or inventor. The information is required to be provided by the person who is the assignee of record of the entire interest or the person who is the applicant or inventor. The information is required to be provided by the person who is the assignee of record of the entire interest or the person who is the applicant or inventor.			

If you need assistance in completing this form, call 1-800-PTO-9199 and select option 2.

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